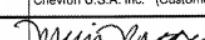


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00041-DV4	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD. Number of CD(s) _____	
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<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
<p>The Director is hereby authorized to charge any additional fees, any underpayment of fees, or credit any overpayments to Deposit Account No. 03-1620, referencing Attorney Docket Number 00041-DV4.</p>		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Chevron U.S.A. Inc. (Customer No. 38393)	
Signature		
Printed name	Melissa Patangia	
Date	January 11, 2010	Reg. No. 52,098

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